

# Infanticide for handicapped infants: sometimes it's a metaphysical dispute

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## Author's abstract

*Since 1973 the practice of infanticide for some severely handicapped newborns has been receiving more open discussion and defence in the literature on medical ethics. A recent and important argument for the permissibility of infanticide relies crucially on a particular concept of personhood that excludes the theological. This paper attempts to show that the dispute between the proponents of infanticide and their religious opponents cannot be resolved because one side's perspective on the infant is shaped by a metaphysics that is emphatically rejected by the other. In such a situation philosophical argument is powerless to bring about a resolution because there can be no refutation of one side by the other.*

## Introduction

In late 1973 the medical world was stunned by an article in *The New England Journal of Medicine*. Written by two paediatric specialists, Drs Raymond S Duff and Alexander G M Campbell, the article described their practices in the intensive-care nursery at Yale-New Haven Hospital from 1970-1972. The most provocative disclosure was that of 299 deaths that occurred during this period a total of 43 resulted from the intentional withdrawal of treatment. The two physicians themselves often played a role in the decisions to withdraw treatment in the 43 cases (1).

Of course, the practice of allowing some infants to die is as old as medicine itself. What Duff and Campbell decided in those 43 cases was not new. It was their 'going public' in a prestigious professional journal that so stunned many practitioners. The authors were not naive about their revelations. Duff and Campbell were fully aware that they had broken 'the public and professional silence on a major social taboo and some common practices'. And they felt this to be 'appropriate', for they hoped that 'out of ensuing dialogue perhaps better choices for patients and families can be made'.

Since the appearance of the Duff-Campbell paper much has been written and said about the ethical issues

surrounding the treatment of defective infants. Today there are physicians and philosophers who are unequivocally advocating infanticide (that is, the active killing) of newborns that exhibit a range of defects.

The purpose of this paper is to discuss a recent and controversial contribution to the debate on infanticide by two influential philosopher-ethicists. I wish to convince the reader that this contribution to the debate about infanticide is and must be philosophically and ethically inconclusive. I hope to show that what these philosopher-ethicists say must fail to defeat their chosen opponent because the debate ultimately is about *incommensurable metaphysical views*.

## The disagreement: what is personhood?

In a paper delivered to the first International Conference on Health Law and Ethics in Sydney, Australia, in August 1986, the well known medical ethicists Helga Kuhse and Peter Singer defended the view that 'there are circumstances where a severely ill or handicapped infant should not only be allowed to die, but should be *helped* to die' (2). It is clear from the concluding paragraph of their article that by '*helped* to die' the authors do not mean 'allowed to die'. Kuhse and Singer have in mind active killing, something they defended in an earlier collaboration (3).

Kuhse and Singer see their main opposition coming from someone with the views of the distinguished moral theologian, the late Paul Ramsey. They begin their article with one, brief quotation from Ramsey and then they attack. Ramsey wrote:

'There is no reason for saying that [six months in the life of a baby born with invariably fatal Tay Sachs disease] are a life span of lesser worth to God than living seventy years before the onset of irreversible degeneration. . . . All our days and years are of equal worth whatever the consequence; death is no more a tragedy at one time than at another time' (4).

Kuhse and Singer see Ramsey as embracing two connected ideas: first, all human life is of equal worth and, second, life-and-death decisions for seriously compromised newborns should not be based on the

## Key words

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quality of life. The authors cannot accept this view. They affirm that what gives any life value is what that life is *like*; what it enables the patient to do or experience. What *benefits* the life confers on the patient is of paramount importance. We are urged to ask whether life is in the patient's *interests*, and this question can only be answered by looking at 'the quality or kind of life' facing us (2). But the Kuhse-Singer position is more complex than this.

When is life or death in the patient's best interests? It is at this point that Kuhse and Singer appeal to a distinction that they find crucial for dealing with issues involving newborns. Put succinctly, infants are not *persons*; that is, infants are not 'self-aware and purposeful beings with a sense of the past and future'; they do not have 'hopes and plans' for the future (2). Only of a being who is self-aware and has a sense of past and future can we say that continued life is in its interests. Persons are able to value their lives, while infants cannot. Since infants are not persons, killing severely handicapped infants threatens no persons and thus violates no one's rights (3).

So in the end the Kuhse-Singer position on infanticide rests crucially on the claim that infant-life is a different *kind* of life. It has a lesser *moral* status than personhood, and as such its deliberate termination is not subject to the rigorous moral strictures we apply to the taking of a person's life. Infant-life, whether handicapped or not, cannot claim any special consideration at the expense of the lives and interests of those affected by it. Whether the non-persons born into society should live or not must be decided by balancing the familial and social costs/benefits. The *quality* of these infant lives, that is, how much suffering and/or discomfort is and will be a feature of them, is of secondary importance in the sense that it must compete for paramountcy with familial and social interests. Because infant-life may lose in this competition and because such life cannot have any special claims on us deriving from its possession of personhood, the permissibility of infanticide ultimately rests on the lesser moral status (ie, the non-personhood) of the infant.

It is now clear why Kuhse and Singer reject the view that all human life is of equal value. This cannot be true if infant-life has such a different moral status from personhood. So does Ramsey stand refuted? Attacked, yes; but not refuted in the strong sense of *disproof*.

Ramsey's rejection of the Kuhse-Singer approach to personhood is explicit and emphatic. 'Indicators of personhood may be of use in psychology, educational theory, and in moral nurture, but to use such indices in the practice of medicine is a grave mistake' (4). In mounting his attack on those ethicists who have joined in the search for 'indicators of personhood', Ramsey begins with several biblical quotations from Jeremiah and Deuteronomy, which he says give us 'images and shadows of divine things' that 'are the foundation of Western medical care' (4). He denies that God's care

for any creature is a 'function of indicators of our personhood, or of our achievement within those capacities'. God 'cares according to need, not capacity or merit' (4). Ramsey implies that ethicists like Kuhse and Singer have distorted the proper goal of medical care by injecting dubious philosophical theories into medical criteria for care. 'Searching for an index of personhood to use . . . is rather like founding medical care on theological judgements about when God infuses the soul into the human organism' (4).

So for Ramsey the fact that infants cannot do certain things (for example, wonder about the past and future) or have certain experiences (for example, be aware of themselves as having a past and future) is medically and morally irrelevant to how they should be cared for. 'Life is not a good: it is an inexplicable gift. . . . It is the duty of parents and physicians and the human community in general to sustain the life of a defective infant – who is not born dying and who cannot refuse treatment – and to insure that its life shall be as good and as free from disability as possible' (4). Contra Kuhse-Singer, the concept of personhood is not something that can be developed by appeals to empirical findings about the capacities or incapacities of infants relative to children and adults. Personhood is inherently a *theological* concept, involving as it does the notion that life is a gift in the image of God.

The metaphysical disagreement between Kuhse-Singer and Ramsey is so basic that it causes certain criticisms of Ramsey simply to misfire. After quoting from Ramsey at the beginning of their article, Kuhse and Singer wonder whether anyone really believes that all life is of equal value and that quality-of-life considerations should not count. This is supposed to be a rhetorical question, but it misfires simply because anyone who shares Ramsey's view of life as a gift in the image of God does find all life to be of equal value. It is for this reason that Ramsey insists that 'allowing to die' is justifiable only 'for the dying'. And he believes that in permitting only the irreversibly dying to die we avoid invidious judgements about 'quality-of-life struggles or prospects' (4).

Nor will it do to suggest, as Kuhse and Singer do, that Ramsey's position fails because it does not give 'equal consideration' to the interests of the family members of handicapped infants (2). Ramsey's theological perspective simply does not structure the situation in this way. For him, deciding what to do about a handicapped newborn cannot be a matter of calculating the weight of diverse interests and then somehow reaching a 'best-on-balance', utilitarian decision. The divine origin of the infant's life gives it a *special* claim over against the interests of family, physicians, etc. To suggest, as Kuhse and Singer do, that this is to violate some 'equal consideration' ethical principle is to demand that Ramsey accept a utilitarian approach whose basic premisses he emphatically rejects. It is to require him to adopt a wholly different perspective on paediatric ethics.

## Some final reflections

Very often one comes away from debates in medical ethics with the feeling that nothing has been resolved; right and wrong have not been discovered; a position has been attacked but hardly vanquished. I believe this feeling to be well founded. Frequently the contenders in these debates are operating from incommensurable positions; that is, their basic premisses are so radically different that none of the arguments developed by either side can make any impression on the other. It's as if one were to try to drown a duck by spraying it with a garden hose. The debate between Kuhse-Singer and people like Ramsey is, I believe, just this kind of clash of incommensurables. Furthermore, both sides appear to recognise this.

Ramsey writes of a Tay Sachs baby born destined to die. Referring to the presymptomatic first six months of such an infant, Ramsey says, 'it is only a reductive naturalism or social utilitarianism that would regard those months of infant life as worthless because they led to nothing along a time line of earthly achievement' (4). Speaking from his 'religious perspective', he says that six months are no less valuable in the eyes of God than any other life-span. So the recognition of incommensurability is here explicit; it is the religious perspective versus some other (reductive naturalism) that denies the transcendent origin of life and so justifies the benign neglect of the handicapped infant on the grounds that such neglect will produce the best balance of interest (social utilitarianism).

Similarly, Kuhse and Singer realise that the biggest obstacle to the acceptance of their position is not some narrowly focused philosophical argument but rather an all-encompassing theological view of human life that they identify as Judaeo-Christian. They write:

'The idea that all human life has a special sanctity has become an ingrained part of our moral consciousness. It is therefore not easy for us to detach ourselves from the intellectual legacy of these centuries; yet this is what we must do if we are to face the crucial moral issue raised by the treatment of severely handicapped infants' (3).

Kuhse-Singer and Ramsey simply have two different metaphysical views of the nature of infant human life. The one view sees it as possessing only a natural, secular meaning that is to be exhaustively fixed by human beings making decisions on the basis of interests they themselves identify and weigh. The other, Ramsey's, holds that all human life possesses an

inviolability flowing from its divine origin. Because of this, no amount of utilitarian calculation can ever justify the destruction of infant life.

It is important to see that because the debate between Kuhse-Singer and Ramsey is ultimately a clash of metaphysical incommensurables the two sides cannot even agree on identifying 'the crucial moral issue raised by the treatment of severely handicapped infants'. For Kuhse-Singer, the crucial moral issue is the morality of infanticide. For Ramsey, this is not an issue at all; infanticide simply cannot receive serious moral consideration.

In the end, of course, Kuhse-Singer never refute Ramsey, if we take 'refute' in its strong sense; that is, 'to show or prove wrong by argument or evidence'. And Ramsey never refutes Kuhse-Singer. We should not expect refutation in this sense when at bottom the disagreement is metaphysical. One side may emerge triumphant. But should this happen it will have far less to do with cogent philosophical argument and far more to do with people's changing attitudes, feelings and desires. Indeed, it is even possible that the triumph of the Kuhse-Singer view must await, not stronger arguments in its favour, but 'merely' the widespread disappearance of people who think like Ramsey. In the history of human ideas it sometimes happens that the proponents of a theory eventually win for no better (or worse) reason than that their opponents exhibit mortality first.

## Editor's note

This paper was written many months before the death of Professor Ramsey.

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## References

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